

PETITIONS FOR COMMITMENT/ RECOMMITMENT AND RECEIVING AND RECORDING HEARINGS/ORDERS

Effective Date: January 20, 2012 Policy #: CP-01

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- I. PURPOSE: To provide procedures for filing petitions for commitment or recommitment in accordance with provisions of state law. To standardize the manner in which voluntary patients may request or withdraw their request to be released from voluntary admission status at Montana State Hospital and to outline a procedure when Montana State Hospital decides to file for involuntary commitment on a patient who has submitted a Request for Release from Voluntary Commitment.
- II. POLICY: In order to ensure petitions for commitment or recommitment are filed in a manner that allows proper notification to the patient, attorneys, professional people, and the courts, and to ensure proper tracking of the process, this procedure will be followed. Montana statute allows for a voluntary patient to request release from Montana State Hospital. This will be accomplished through the signing, submission, and processing of a standardized form utilized for that purpose. A voluntary patient may also withdraw a Request for Release from Voluntary commitment through the signing, submitting, and processing of another part of the same standardized form.

III. DEFINITIONS:

- A. Mental Health Professional Person is defined as:
 - 1. a medical doctor, or
 - 2. another person who has met education, experience, and examination requirements established by the Addictive and Mental Disorders Division of the Department of Public Health and Human Services.
- B. Mental Status Examination/Evaluation is both a descriptive inventory of behaviors and a method by which to systematically organize and record observations, which describe the patient's behaviors. The patient's verbal and nonverbal behaviors as well as the patient's self-report of certain subjective experiences, are included in the mental status exam. From observation of these variables, inferences about the mental and emotional condition of the patient can be made. From these inferences, a working diagnosis and a treatment approach may be formulated.
- C. <u>Tickler (see Attachment F)</u> is a form that gives a brief summary of patient information including date and type of admission; unit location; patient's full name

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and hospital number; court case number; length of involuntary commitment; next of kin; their address; county and city of residence; treating LIP at Montana State Hospital and, upon recommitment, date of last mental status examination.

IV. RESPONSIBILITIES:

- A. Admissions Coordinator and Team Leader To monitor recommitments and ensure reports are completed and sent to the Admissions Office in a timely manner.
- B. Administrative Assistant to Admissions
 - 1. Maintain an accurate database of commitment information. This database will be utilized to inform Mental Health Professionals when commitment/recommitment reports are due.
 - 2. Process legal documents relating to recommitment in an efficient manner per statute requirements.
 - 3. Administrative Assistant to Clinical Services Maintain an accurate database of commitment information. This database will be utilized to inform Mental Health Professionals when commitment/recommitment reports are due.
- C. Certified Mental Health Professionals To complete and submit to the Admissions Office, three weeks prior to the end of the current commitment, an updated Mental Status Examination (MSH Recommitment Report) for those patients requiring recommitment.
- D. MSH Social Work Staff Ensures patients receive the Notice of Petition Extending Commitment (see Attachment C) and explains petition to the patient.

V. PROCEDURE:

A. The Administrative Assistant to Admissions & Administrative Assistant to Clinical Services will maintain a database of commitment information. The database will include each patient's name and hospital number, date of commitment order, due date for recommitment petition, commitment expiration date, and the date petition/affidavit was filed.

B. PROCEDURE FOR FILING RECOMMITMENT PETITIONS

- 1. Notice will be provided each month to the Team Leader of recommitment petitions due for patients on their treatment program. This notice will list the patient's name, MSH number, the date the commitment expires, and the date by which the petition and mental status evaluation needs to be received for mailing.
- 2. Petitions for recommitment and accompanying Mental Status Evaluations must be received by the Admissions Office three weeks before the expiration of a commitment. The Admissions Office will provide adequate notice of this date to the professional person responsible for filing the petitions.

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- 3. Near the expiration of any civil involuntary or criminal commitment, patients may be assessed to determine whether they may remain at the hospital on voluntary status. If the staff and the patient agree that the conditions for voluntary status are met, the voluntary admission forms must be completed and forwarded to the Administrative Assistant to Admissions. The status change will occur on the expiration date of the involuntary or criminal commitment. Patients determined to be incapacitated and for whom a guardian has been appointed may not be converted to voluntary status even with the authorization of the guardian.
- 4. Mental Health Professionals responsible for a recommitment evaluation must present one signed original mental status evaluation to the Administrative Assistant to Admissions. The original is distributed to Clerk of District Court. Additional copies will be distributed as follows: 1) DPHHS Legal Unit; 2) Medical Record; 3) Legal Services Office of the Board of Visitors.
- 5. Upon receipt of the new recommitment evaluation, the Administrative Assistant to Admissions will complete a Petition for Commitment which is signed by the Mental Health Professional. A copy of the Petition for Commitment is distributed to Medical Record and to the Chief Deputy Attorney General, as well as the persons listed in #4 above. After completion of the petition, the Administrative Assistant to Admissions will complete a document titled Notice of Petition Extending Commitment (see Attachment C). Social Work staff are responsible for ensuring that this document is received by the patient. This will be documented on the form titled: Receipt by Patient of Copy of Petition Order, which is also completed by Administrative Assistant to Admissions. Social Work staff are also responsible for explaining the petition to the patient and providing them or their families with any necessary assistance. A notice of Petition Extending Commitment is sent to the patient's responsible party or next of kin, his/her court appointed legal friend, and to the patient by the Administrative Assistant to Admissions. A new Tickler (see Attachment F) form is completed and one copy is made. The original tickler is sent to the Medical Record and the copy is sent to the DPHHS Legal Unit.
- 6. Upon completion of the above, the Administrative Assistant to Admissions will update the commitment database with the date the petition was filed.

C. <u>PROCEDURE FOR FILING PETITIONS ON VOLUNTARILY COMMITTED</u> PATIENTS WHO REQUEST DISCHARGE.

1. When a patient on a voluntary commitment to Montana State Hospital petitions for release, the patient is to sign and submit the form entitled "Request For Release From Voluntary Commitment" (Attachment A). Documentation of the patient's request for Release from Voluntary Commitment is to be entered immediately in the progress notes in the patient's chart on the day the request for release is signed. The Administrative Assistant to Admissions or Admission

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Coordinator are to be notified that same day that a person has requested release from voluntary admission status. If the petition has been signed after regular business hours or on the weekend, notification should occur no later than the next business day. In accordance with Montana Statutes, the Professional Person, usually the psychiatrist, must make a decision to either discharge the patient or file a petition for involuntary commitment. While the law allows the hospital to hold the patient for up to five days before releasing the patient or filing for involuntary commitment, notice of the action that will be taken must be received in the Admissions Office within three days so that the proper documents can be filed with the court.

- 2. A treatment team member will discuss the request for release with the patient and inform that patient of the hospital's right to detain him/her for no more than five days, excluding weekends and holidays, from the date on the form. The patient will also be notified that the hospital may seek an involuntary commitment through district court if it is believed by the treatment team that the patient is seriously mentally ill and if it is determined that the patient meets commitment criteria. The Team Leader will, following the treatment team's decision, forward the request for release from voluntary commitment within three days of signing to the Administrative Assistant to Admissions. The form will then be distributed as follows:
 - a. Original Patient's Medical Record
 - b. Copy 1 Medical Director
 - c. Copy 2 Patient's Attorney
 - d. Copy 3 DPHHS Legal Unit in Helena
 - e. Copy 4 Patient
- 3. After the request for release from voluntary commitment is signed by the patient, one of three possibilities needs to occur:
 - a. Release
 - 1) If it is determined by the treatment team that the person does not meet involuntary commitment criteria, that person shall be released as soon as appropriate arrangements can be made (but no later than five working days following the signing of the request) from Montana State Hospital. Montana State Hospital discharge planning procedures shall be the same as with any other type of discharge from the hospital.
 - b. Involuntary Commitment Petition
 - 1) If it is determined that the person meets involuntary commitment criteria and should not be released, the Administrative Assistant to Admissions shall be notified immediately (no later than three working days following the signing of the request) and a petition for commitment will be filed in district court.

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- 2) When a decision is made to file for involuntary commitment, an Affidavit (see Attachment E) will be completed by the Legal Unit. The Professional Person must submit a short statement regarding the need for additional treatment to the Administrative Assistant to Admissions. Once completed, the affidavit must be signed by the professional person and notarized. A Petition For Commitment, Order Setting Initial Hearing, and Order Upon Initial Hearing documents are also completed. These documents will be faxed to the Clerk of the District Court, with the original to follow in the mail. Copies will be made for the Medical Record, DPHHS Legal Unit and the BOV Legal Services Offices.
- 3) The date that the affidavit was filed will be entered into the commitment database.
- 4) After the affidavit is filed, an initial hearing is held at which time a professional person (normally the same person who filed the affidavit) will be appointed to conduct an evaluation regarding the need for involuntary commitment.
- c. Withdrawal of Request for Release
 - 1) A patient may withdraw his/her request for release from voluntary commitment by signing the bottom section of the form entitled "Withdrawal of Request for Release from Voluntary Commitment" (see Attachment A). The Administrative Assistant to Admissions should be notified the same day as the withdrawal was signed, or the next working day, if after hours. Should the patient decide to withdraw his/her request for release from voluntary commitment, the form will be distributed as noted in section 2) above.

One of the above options must occur within five days following the signing of the Request for Release From Voluntary Commitment.

- 4. Procedure regarding the receipt of commitment orders by the hospital
 - a. All commitment orders are to be routed to the Admissions Office. Staff in the Admissions Office will review the order and update necessary information in the commitment database. Questions regarding the contents of an order will be referred to the DPHHS Legal Unit. The Admissions Office will make copies of new orders and route them as follows: Two (2) copies to the reimbursement office; one (1) copy to the Board of Visitors Legal Services; one (1) copy to DPHHS Legal Unit, one (1) copy to the Administrative Assistant to Clinical Services, and one (1) copy to the patient. For patients on a criminal commitment, additional copies will be made and sent to the Forensic Unit Team Leader, social workers, and psychologists.
 - b. The original copy is to be filed in the patient's medical record.

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- VI. **REFERENCES:** 53-21-111, MCA Voluntary Admissions; 53-21-121 through 53-21-128 Petition for Extension of Commitments.
- VII. **COLLABORATED WITH:** Associate Hospital Administrator; Social Work Discipline Chief/Admissions Coordinator, Director of Information Resources, Medical Director, Addictive & Mental Disorders Division Legal Unit.
- **VIII. RESCISSIONS:** #CP-01, Petitions for Commitment/Recommitment and Receiving and Recording Hearings/Orders dated May 2, 2008; Petitions for Commitment/Recommitment and Receiving and Recording Hearings/Orders dated May 2, 2005; #CP-01, Petitions for Commitment/Recommitment and Receiving and Recording Hearings/Orders dated March 15, 2002; Policy #CP-01 Petitions for Commitment/Recommitment & Receiving and Recording Hearings/Orders dated February 14, 2000; MSH Hospital Policy CRP-01-96-R; CRP-02-97-R, Petitions for Commitment/Recommitment and Receiving and Recording Hearings/Orders dated February 26, 1997.
- IX. **DISTRIBUTION:** All hospital policy manuals.
- X. ANNUAL REVIEW AND AUTHORIZATION: This policy is subject to annual review and authorization for use by either the Administrator or the Medical Director with written documentation of the review per M.C.A. § 307-106-330.
- XI. FOLLOW-UP RESPONSIBILITY: Associate Hospital Administrator
- XII. **ATTACHMENTS:**
 - A. Request for Release from Voluntary Commitment
 - B. Petition for Commitment form Attachment B.doc
 - C. Notice of Petition Extending Commitment Attachment C.docx
 - D. Receipt by Patient of Copy of Petition/Order Attachment D.doc
 - E. Affidavit Attachment E.docx

F. Tickler Atta	chment F.doc		
G. Petition for	Commitment Orde	er Attachment G.docx	
H. Order Settin	g Initial Hearing (Order Attachment H.docx	
I. Order Upon	Initial Hearing Or	rder Attachment I.docx	
	/ /		/ /
John W. Glueckert	Date	Thomas Gray, MD	Date
Hospital Administrator		Medical Director	
	//		
Joan Daly	Date		
Associate Hospital Admini	strator		

Montana State Hospital REQUEST FOR RELEASE FROM VOLUNTARY COMMITMENT

TO: Administrator

Montana State Hospital Warm Springs, MT 59756

Pursuant to Title 53, Chapter 21-111 (3) M.C.A., 2001 which specifies:

"An applicant for Voluntary Admission must give the facility the right to detain the applicant for no more than five (5) days, excluding weekends and holidays, past the applicant's written request for release."

more than fi	ve (5) days, excluding weekends a	and holidays, past the applicant's written request for release."
"The facility	may request a court to involuntari	ly commit the applicant."
•	quest that I be released from Mand holidays.	Iontana State Hospital within five (5) days, excluding
	(Signature)	(Date)
	(Witness)	(Date)
Professional F	Person recommends the following:	
The patier	nt presents as an imminent threat to s	s not presenting an imminent threat to self or others. self or others and needs involuntary commitment. d I will re-evaluate within five (5) days excluding weekends and
Based on the	Professional Person's recommendatio	n the Treatment Team will:
Assist pati	ent and staff in implementation of Em	ate release of patient within five (5) days. nergency Detention and Commitment to Montana State Hospital. n of the patient within five (5) days excluding weekends and holidays.
Disposition	: Discharged Committ	ed (Date)
WITHDR	RAWAL OF REQUEST FOR	R RELEASE FROM VOLUNTARY COMMITMENT
I hereby wi	thdraw my request for release t	from Voluntary Commitment.
	(Signature)	(Date)
	(Witness)	(Date)
Original to: Patient's Medical Record Copies to: Administration Patient		Patient's Name:
	Patient's Number:	
	Unit:	